Calendar No. 518

110TH CONGRESS 1ST SESSION S. 1382

To amend the Public Health Service Act to provide for the establishment of an Amyotrophic Lateral Sclerosis Registry.

IN THE SENATE OF THE UNITED STATES

May 14, 2007

Mr. Reid (for himself, Mrs. Murray, Mrs. Boxer, Mr. Harkin, Mr. Brown, Mr. Isakson, Mr. Inouye, Mr. Durbin, Mr. Sanders, Mr. Craig, Mr. BAUCUS, Mr. REED, Mrs. FEINSTEIN, Mr. COLEMAN, Mr. COCHRAN, Mr. CONRAD, Mrs. CLINTON, Mr. MENENDEZ, Mr. THUNE, Mr. BUNNING, Ms. Murkowski, Mrs. Dole, Mr. Johnson, Ms. Klobuchar, Mr. Burr, Mr. Dodd, Mr. Nelson of Florida, Mr. Bayh, Mr. Hagel, Mr. Lautenberg, Mr. Vitter, Mr. Warner, Mr. Schumer, Mr. Binga-MAN, Mr. LOTT, Mr. DEMINT, Mr. BENNETT, Ms. SNOWE, Mr. DORGAN, Ms. Stabenow, Mr. Martinez, Mr. Casey, Mr. Graham, Mr. Tester, Mr. Smith, Mr. Lieberman, Mr. Whitehouse, Mr. Cardin, Mr. AKAKA, Mr. Grassley, Ms. Cantwell, Ms. Collins, Ms. Landrieu, Mr. Wyden, Ms. Mikulski, Mr. Brownback, Mr. Sessions, Mr. BIDEN, Mr. KERRY, Mr. LEAHY, Mr. CHAMBLISS, Mrs. McCaskill, Mr. LEVIN, Mr. CARPER, Mr. PRYOR, Mr. SUNUNU, and Mrs. LINCOLN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

DECEMBER 4, 2007

Reported by Mr. Kennedy, with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

A BILL

To amend the Public Health Service Act to provide for

the establishment of an Amyotrophic Lateral Sclerosis Registry.

Be it enacted by the Senate and House of Representa-1 2 tives of the United States of America in Congress assembled, 3 SECTION 1. SHORT TITLE. 4 This Act may be eited as the "ALS Registry Act". 5 SEC. 2. FINDINGS. 6 Congress makes the following findings: 7 (1) Amyotrophic lateral sclerosis (referred to in 8 this section as "ALS") is a fatal, progressive 9 neurodegenerative disease that affects motor nerve 10 cells in the brain and the spinal cord. 11 (2) The average life expectancy for a person with ALS is 2 to 5 years from the time of diagnosis. 12 13 (3) The cause of ALS is not well understood. 14 (4) There is only one drug currently approved 15 by the Food and Drug Administration for the treat-16 ment of ALS, which has thus far shown only modest 17 effects, prolonging life by just a few months. 18 (5) There is no known cure for ALS. 19 (6) More than 5,000 individuals in the United 20 States are diagnosed with ALS annually and as

many as 30,000 individuals may be living with ALS

in the United States today.

21

22

1	(7) Studies have found relationships between
2	ALS and environmental and genetic factors, but
3	those relationships are not well understood.
4	(8) Scientists believe that there are significant
5	ties between ALS and other motor neuron diseases
6	(9) Several ALS disease registries and data
7	bases exist in the United States and throughout the
8	world, including the SOD1 database, the National
9	Institute of Neurological Disorders and Stroke re-
10	pository, and the Department of Veterans Affairs
11	ALS Registry.
12	(10) A single national system to collect and
13	store information on the prevalence and incidence of
14	ALS in the United States does not exist.
15	(11) In each of fiscal years 2006 and 2007
16	Congress directed \$887,000 to the Centers for Dis-
17	ease Control and Prevention to begin a nationwide
18	ALS registry.
19	(12) The Centers for Disease Control and Pre-
20	vention and the Agency for Toxic Substances and
21	Disease Registry has established three pilot projects
22	beginning in fiscal year 2006, to evaluate the science
23	to guide the creation of a national ALS registry.
24	(13) The establishment of a national registry

25

will help-

1	(A) to identify the incidence and preva-
2	lence of ALS in the United States;
3	(B) to collect data important to the study
4	of ALS;
5	(C) to promote a better understanding of
6	ALS;
7	(D) to collect information that is impor-
8	tant for research into the genetic and environ-
9	mental factors that cause ALS;
10	(E) to strengthen the ability of a clearing-
11	house—
12	(i) to collect and disseminate research
13	findings on environmental, genetic and
14	other causes of ALS and other motor neu-
15	ron disorders that can be confused with
16	ALS, misdiagnosed as ALS, and in some
17	eases progress to ALS;
18	(ii) make available information to pa-
19	tients about research studies for which
20	they may be eligible; and
21	(iii) maintain information about clin-
22	ical specialists and clinical trials on thera-
23	pies; and
24	(F) to enhance efforts to find treatments
25	and a cure for ALS.

1	SEC. 3. AMENDMENT TO THE PUBLIC HEALTH SERVICE
2	ACT.
3	Part P of title III of the Public Health Service Act
4	(42 U.S.C. 280g et seq.) is amended by adding at the end
5	the following:
6	"SEC. 399R. AMYOTROPHIC LATERAL SCLEROSIS REG-
7	ISTRY.
8	"(a) Establishment.—
9	"(1) In General.—Not later than 1 year after
10	the receipt of the report described in subsection
11	(b)(2)(A), the Secretary, acting through the Director
12	of the Centers for Disease Control and Prevention
13	and in consultation with a national voluntary health
14	organization with experience serving the population
15	of individuals with amyotrophic lateral sclerosis (re-
16	ferred to in this section as 'ALS'), shall—
17	"(A) develop a system to collect data on
18	ALS and other motor neuron disorders that can
19	be confused with ALS, misdiagnosed as ALS,
20	and in some cases progress to ALS, including
21	information with respect to the incidence and
22	prevalence of the disease in the United States;
23	and
24	"(B) establish a national registry for the
25	collection and storage of such data to include a
26	population-based registry of eases in the United

1	States of ALS and other motor neuron dis-
2	orders that can be confused with ALS,
3	misdiagnosed as ALS, and in some eases
4	progress to ALS.
5	"(2) Purpose.—It is the purpose of the reg-
6	istry established under paragraph (1)(B) to gather
7	available data concerning—
8	"(A) ALS, including the incidence and
9	prevalence of ALS in the United States;
10	"(B) the environmental and occupational
11	factors that may be associated with the disease;
12	"(C) the age, race or ethnicity, gender, and
13	family history of individuals who are diagnosed
14	with the disease;
15	"(D) other motor neuron disorders that
16	can be confused with ALS, misdiagnosed as
17	ALS, and in some cases progress to ALS; and
18	"(E) other matters as recommended by the
19	Advisory Committee established under sub-
20	section (b).
21	"(b) Advisory Committee.—
22	"(1) Establishment.—Not later than 90 days
23	after the date of the enactment of this section, the
24	Secretary, acting through the Director of the Cen-
25	ters for Disease Control and Prevention, shall estab-

lish a committee to be known as the Advisory Committee on the National ALS Registry (referred to in this section as the 'Advisory Committee'). The Advisory Committee shall be composed of at least one member, to be appointed by the Secretary, acting through the Director of the Centers for Disease Control and Prevention, representing each of the following:

"(A) National voluntary health associations that focus solely on ALS and have demonstrated experience in ALS research, care, and patient services, as well as other voluntary associations focusing on neurodegenerative diseases that represent and advocate on behalf of patients with ALS and patients with other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS.

"(B) The National Institutes of Health, to include, upon the recommendation of the Director of the National Institutes of Health, representatives from the National Institute of Neurological Disorders and Stroke and the National Institute of Environmental Health Sciences.

"(C) The Department of Veterans Affairs.

1	"(D) The Agency for Toxic Substances
2	and Disease Registry.
3	"(E) The Centers for Disease Control and
4	Prevention.
5	"(F) Patients with ALS or their family
6	members.
7	"(G) Clinicians with expertise on ALS and
8	related diseases.
9	"(H) Epidemiologists with experience in
10	data registries.
11	"(I) Geneticists or experts in genetics who
12	have experience with the genetics of ALS or
13	other neurological diseases.
14	"(J) Statisticians.
15	"(K) Ethicists.
16	"(L) Attorneys.
17	"(M) Other individuals with an interest in
18	developing and maintaining the National ALS
19	Registry.
20	"(2) Duties.—The Advisory Committee shall
21	review information and make recommendations to
22	the Secretary concerning—
23	"(A) the development and maintenance of
24	the National ALS Registry:

1	"(B) the type of information to be col-
2	lected and stored in the Registry;
3	"(C) the manner in which such data is to
4	be collected;
5	"(D) the use and availability of such data
6	including guidelines for such use; and
7	"(E) the collection of information about
8	diseases and disorders that primarily affect
9	motor neurons that are considered essential to
10	furthering the study and cure of ALS.
11	"(3) REPORT.—Not later than 1 years after the
12	date on which the Advisory Committee is estab-
13	lished, the Advisory Committee shall submit a report
14	concerning the review conducted under paragraph
15	(2) that contains the recommendations of the Advi-
16	sory Committee with respect to the results of such
17	review.
18	"(c) Grants. Notwithstanding the recommenda-
19	tions of the Advisory Committee under subsection (b), the
20	Secretary, acting through the Director of the Centers for
21	Disease Control and Prevention, may award grants to, and
22	enter into contracts and cooperative agreements with, pub-
23	lie or private nonprofit entities for the collection, analysis,
24	and reporting of data on ALS and other motor neuron

1	disorders that can be confused with ALS, misdiagnosed
2	as ALS, and in some cases progress to ALS.
3	"(d) Coordination With State, Local, and Fed-
4	ERAL REGISTRIES.—
5	"(1) In General.—In establishing the Na-
6	tional ALS Registry under subsection (a), the Sec-
7	retary, acting through the Director of the Centers
8	for Disease Control and Prevention, shall—
9	"(A) identify, build upon, expand, and co-
10	ordinate among existing data and surveillance
11	systems, surveys, registries, and other Federal
12	public health and environmental infrastructure
13	wherever possible, including—
14	"(i) the 3 ALS registry pilot projects
15	initiated in fiscal year 2006 by the Centers
16	for Disease Control and Prevention and
17	the Agency for Toxic Substances and Dis-
18	ease Registry at the South Carolina Office
19	of Research & Statistics; the Mayo Clinic
20	in Rochester, Minnesota; and Emory Uni-
21	versity in Atlanta, Georgia;
22	"(ii) the Department of Veterans Af-
23	fairs ALS Registry;
24	"(iii) the DNA and Cell Line Reposi-
25	tory of the National Institute of Neuro-

1	logical Disorders and Stroke Human Ge-
2	netics Resource Center;
3	"(iv) Agency for Toxic Substances
4	and Disease Registry studies, including
5	studies conducted in Illinois, Missouri, El
6	Paso and San Antonio, Texas, and Massa-
7	chusetts;
8	"(v) State-based ALS registries, in-
9	eluding the Massachusetts ALS Registry;
10	"(vi) the National Vital Statistics Sys-
11	tem; and
12	"(vii) any other existing or relevant
13	databases that collect or maintain informa-
14	tion on those motor neuron diseases rec-
15	ommended by the Advisory Committee es-
16	tablished in subsection (b); and
17	"(B) provide for research access to ALS
18	data as recommended by the Advisory Com-
19	mittee established in subsection (b) to the ex-
20	tent permitted by applicable statutes and regu-
21	lations and in a manner that protects personal
22	privacy consistent with applicable privacy stat-
23	utes and regulations.
24	"(2) Coordination with NIH and Depart-
25	MENT OF VETERANS AFFAIRS — Notwithstanding the

- 1 recommendations of the Advisory Committee estab-
- 2 lished in subsection (b), and consistent with applica-
- 3 ble privacy statutes and regulations, the Secretary
- 4 shall ensure that epidemiological and other types of
- 5 information obtained under subsection (a) is made
- 6 available to the National Institutes of Health and
- 7 the Department of Veterans Affairs.
- 8 "(e) Definition.—For the purposes of this section,
- 9 the term 'national voluntary health association' means a
- 10 national non-profit organization with chapters or other af-
- 11 filiated organizations in States throughout the United
- 12 States.
- 13 "(f) AUTHORIZATION OF APPROPRIATIONS.—There
- 14 are authorized to be appropriated to carry out this section,
- 15 \$25,000,000 for fiscal year 2008, and such sums as may
- 16 be necessary for each of fiscal years 2009 through 2012.".
- 17 SECTION 1. SHORT TITLE.
- This Act may be cited as the "ALS Registry Act".
- 19 SEC. 2. AMENDMENT TO THE PUBLIC HEALTH SERVICE ACT.
- 20 Part P of title III of the Public Health Service Act
- 21 (42 U.S.C. 280g et seg.) is amended by adding at the end
- 22 the following:
- 23 "SEC. 399R. AMYOTROPHIC LATERAL SCLEROSIS REGISTRY.
- 24 "(a) Establishment.—

1	"(1) In general.—Not later than 1 year after
2	the receipt of the report described in subsection
3	(b)(2)(A), the Secretary, acting through the Director
4	of the Centers for Disease Control and Prevention,
5	shall—
6	"(A) develop a system to collect data on
7	amyotrophic lateral sclerosis (referred to in this
8	section as 'ALS') and other motor neuron dis-
9	orders that can be confused with ALS,
10	misdiagnosed as ALS, and in some cases
11	progress to ALS, including information with re-
12	spect to the incidence and prevalence of the dis-
13	ease in the United States; and
14	"(B) establish a national registry for the
15	collection and storage of such data to develop a
16	population-based registry of cases in the United
17	States of ALS and other motor neuron disorders
18	that can be confused with ALS, misdiagnosed as
19	ALS, and in some cases progress to ALS.
20	"(2) Purpose.—It is the purpose of the registry
21	established under paragraph (1)(B) to—
22	"(A) better describe the incidence and prev-
23	alence of ALS in the United States;

1	"(B) examine appropriate factors, such as
2	environmental and occupational, that may be as-
3	sociated with the disease;
4	"(C) better outline key demographic factors
5	(such as age, race or ethnicity, gender, and fam-
6	ily history of individuals who are diagnosed
7	with the disease) associated with the disease;
8	"(D) better examine the connection between
9	ALS and other motor neuron disorders that can
10	be confused with ALS, misdiagnosed as ALS,
11	and in some cases progress to ALS; and
12	"(E) other matters as recommended by the
13	Advisory Committee established under subsection
14	<i>(b)</i> .
15	"(b) Advisory Committee.—
16	"(1) Establishment.—Not later than 180 days
17	after the date of the enactment of this section, the Sec-
18	retary, acting through the Director of the Centers for
19	Disease Control and Prevention, shall establish a
20	committee to be known as the Advisory Committee on
21	the National ALS Registry (referred to in this section
22	as the 'Advisory Committee'). The Advisory Com-
23	mittee shall be composed of not more than 27 mem-
24	bers to be appointed by the Secretary, acting through

1	the Centers for Disease Control and Prevention, of
2	which—
3	"(A) two-thirds of such members shall rep-
4	resent governmental agencies—
5	"(i) including at least one member rep-
6	resenting—
7	"(I) the National Institutes of
8	Health, to include, upon the rec-
9	ommendation of the Director of the Na-
10	tional Institutes of Health, representa-
11	tives from the National Institute of
12	Neurological Disorders and Stroke and
13	the National Institute of Environ-
14	mental Health Sciences;
15	"(II) the Department of Veterans
16	Affairs;
17	"(III) the Agency for Toxic Sub-
18	stances and Disease Registry; and
19	"(IV) the Centers for Disease Con-
20	trol and Prevention; and
21	"(ii) of which at least one such member
22	shall be a clinician with expertise on ALS
23	and related diseases, an epidemiologist with
24	experience in data registries, a statistician,
25	an ethicist, and a privacy expert (relating

1	to the privacy regulations under the Health
2	Insurance Portability and Accountability
3	Act of 1996); and
4	"(B) one-third of such members shall be
5	public members, including at least one member
6	representing—
7	"(i) national and voluntary health as-
8	sociations;
9	"(ii) patients with ALS or their fam-
10	ily members;
11	"(iii) clinicians with expertise on ALS
12	and related diseases;
13	"(iv) epidemiologists with experience
14	in data registries;
15	"(v) geneticists or experts in genetics
16	who have experience with the genetics of
17	ALS or other neurological diseases and
18	"(vi) other individuals with an interest
19	in developing and maintaining the Na-
20	$tional\ ALS\ Registry.$
21	"(2) Duties.—The Advisory Committee shall re-
22	view information and make recommendations to the
23	Secretary concerning—
24	"(A) the development and maintenance of
25	$the\ National\ ALS\ Registry;$

1	"(B) the type of information to be collected
2	and stored in the Registry;
3	"(C) the manner in which such data is to
4	$be\ collected;$
5	"(D) the use and availability of such data
6	including guidelines for such use; and
7	"(E) the collection of information about dis-
8	eases and disorders that primarily affect motor
9	neurons that are considered essential to fur-
10	thering the study and cure of ALS.
11	"(3) Report.—Not later than 270 days after the
12	date on which the Advisory Committee is established,
13	the Advisory Committee shall submit a report to the
14	Secretary concerning the review conducted under
15	paragraph (2) that contains the recommendations of
16	the Advisory Committee with respect to the results of
17	such review.
18	"(c) Grants.—The Secretary, acting through the Di-
19	rector of the Centers for Disease Control and Prevention,
20	may award grants to, and enter into contracts and coopera-
21	tive agreements with, public or private nonprofit entities
22	for the collection, analysis, and reporting of data on ALS
23	and other motor neuron disorders that can be confused with
24	ALS, misdiagnosed as ALS, and in some cases progress to
25	ALS after receiving the report under subsection (b)(3).

1	"(d) Coordination With State, Local, and Fed-					
2	eral Registries.—					
3	"(1) In general.—In establishing the National					
4	ALS Registry under subsection (a), the Secretary,					
5	acting through the Director of the Centers for Disease					
6	Control and Prevention, shall—					
7	"(A) identify, build upon, expand, and co-					
8	8 ordinate among existing data and surveillar					
9	systems, surveys, registries, and other Federal					
10	public health and environmental infrastructure					
11	wherever possible, which may include—					
12	"(i) any registry pilot projects pre-					
13	viously supported by the Centers for Disease					
14	Control and Prevention;					
15	"(ii) the Department of Veterans Af-					
16	$fairs\ ALS\ Registry;$					
17	"(iii) the DNA and Cell Line Reposi-					
18	tory of the National Institute of Neuro-					
19	logical Disorders and Stroke Human Genet-					
20	ics Resource Center at the National Insti-					
21	$tutes\ of\ Health;$					
22	"(iv) Agency for Toxic Substances and					
23	Disease Registry studies, including studies					
24	conducted in Illinois, Missouri, El Paso and					
25	San Antonio. Texas. and Massachusetts:					

1	"(v) State-based ALS registries;
2	"(vi) the National Vital Statistics Sys-
3	tem; and
4	"(vii) any other existing or relevant
5	databases that collect or maintain informa-
6	tion on those motor neuron diseases rec-
7	ommended by the Advisory Committee es-
8	tablished in subsection (b); and
9	"(B) provide for research access to ALS
10	data as recommended by the Advisory Committee
11	established in subsection (b) to the extent per-
12	mitted by applicable statutes and regulations
13	and in a manner that protects personal privacy
14	consistent with applicable privacy statutes and
15	regulations.
16	"(2) Coordination with nih and department
17	of veterans affairs.—Consistent with applicable
18	privacy statutes and regulations, the Secretary shall
19	ensure that epidemiological and other types of infor-
20	mation obtained under subsection (a) is made avail-
21	able to the National Institutes of Health and the De-
22	partment of Veterans Affairs.
23	"(e) Definition.—For the purposes of this section, the
24	term 'national voluntary health association' means a na-
25	tional non-profit organization with chapters or other affili-

- 1 ated organizations in States throughout the United States
- 2 with experience serving the population of individuals with
- 3 ALS and have demonstrated experience in ALS research,
- 4 care, and patient services.
- 5 "(f) AUTHORIZATION OF APPROPRIATIONS.—There are
- 6 authorized to be appropriated to carry out this section,
- 7 \$2,000,000 for fiscal year 2008, \$25,000,000 for fiscal year
- 8 2009, and \$16,000,000 for each of fiscal years 2010 through
- 9 2012.".

10 SEC. 3. REPORT ON REGISTRIES.

- Not later than 18 months after the date of enactment
- 12 of this Act, the Secretary of Health and Human Services
- 13 shall submit to the appropriate committees of Congress a
- 14 report outlining—
- 15 (1) the registries currently under way;
- 16 (2) future planned registries;
- 17 (3) the criteria involved in determining what
- 18 registries to conduct, defer, or suspend; and
- 19 (4) the scope of those registries.
- 20 The report shall also include a description of the activities
- 21 the Secretary undertakes to establish partnerships with re-
- 22 search and patient advocacy communities to expand reg-
- 23 istries.

Calendar No. 518

110TH CONGRESS S. 1382

A BILL

To amend the Public Health Service Act to provide for the establishment of an Amyotrophic Lateral Sclerosis Registry.

DECEMBER 4, 2007
Reported with an amendment